



## Oncology Nurses... Who Are We?

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Although nurses have cared for those with cancer since the establishment of nursing as a profession, the specialty of oncology nursing is relatively new. It began in the 1950's and developed because of scientific and technological developments, a national and international recognition of cancer as a major chronic health problem, changes in the professional and public perceptions of cancer, and changes in the nursing profession.<sup>1</sup>

Prior to the 1900s the survival rates for cancer were very low. It was a poorly understood disease and feared by both the public and health professionals. Many believed that cancer was contagious. Surgery was the primary treatment and nursing care focused on the care of the surgical client.<sup>2</sup>

With the discovery of chemotherapy during World War II, single agent chemotherapy was introduced as a treatment modality in the 1950s and 1960s. Radiation therapy techniques were established with the development of the cobalt-60 unit. The stigma of cancer continued, and it was common not to inform the patient about his or her diagnosis, treatment or prognosis.<sup>1</sup>

The passing of the National Cancer Act in 1971 by Congress which authorized a broad, intensive program to reduce the incidence, morbidity and mortality of cancer was a significant event. Cancer was now viewed as a national health problem.<sup>1</sup>

At about the same time, comprehensive cancer centers were developing, hospitals established oncology units and combination chemotherapy and multimodal treatment approaches began to improve survival rates. The National Cancer Institute and the American Cancer Society developed a multimedia public education program to provide the public with a clearer understanding of cancer to remove much of the stigma and fear associated with cancer. With these events, a more optimistic attitude about cancer emerged.<sup>1,2</sup>

During the 1970s the nursing profession also introduced the roles of independent practice, primary care practitioners, primary nursing and specialization. The First National Cancer Nursing Conference was held in 1973, sponsored by the American Nurses Association and the American Cancer Society. Twenty nurses met to discuss the idea of a national organization which resulted in the establishment of the Oncology Nursing Society (ONS) in 1975. The major goal of ONS is to use its resources to promote the highest professional standards for oncology nurses.<sup>1,3</sup>

ONS published standards for professional nursing practice within the specialty of oncology in 1979. This document, *Outcome Standards for Cancer Nursing Practice* was the first standards developed in oncology nursing and provided the foundation for the development of oncology nursing as a specialty. Standards are important to a profession as they describe the responsibilities for which oncology nurses are accountable and a competency level of professional nursing practice. Over the next several years standards were developed

for the practice of advanced practice nursing in oncology and for oncology nursing education for the generalist and advanced practice levels.

### Scope of Oncology Nursing Practice

The scope of oncology nursing practice is very broad. Nurses play a significant role in the continuum of cancer care. We are well aware of the significant **practice** role of the oncology nurse. Well known are the nurses who provide competent and compassionate care in hospital settings. In addition, there are the nurses who provide care in outpatient chemotherapy/biotherapy clinics, radiation therapy centers or in physicians' offices. All of these nurses have a major role in assisting patients to cope with the side effects of their disease and treatment and in providing psychosocial support to the patients and families.

Advanced practice nurses, those with masters degrees in nursing, function as clinical nurse specialists, nurse practitioners or administrators of oncology programs. They are clinical experts in oncology nursing and may provide direct services to patients, be involved in staff development, and plan and implement new programs to better serve those with cancer.

Nurses also are involved in the **prevention and early detection** of cancer, working with cancer risk assessment, in breast health clinics or targeting high risk groups or those groups that have low participation in screening activities such as mammography or pap smear. Education is a major focus in assisting clients to care for themselves by participating in prevention and screening activities.

Nurses play a significant role in **palliative and hospice care**. Their patients are those with cancer for which there is no cure and those who are in the terminal stages of their illness. These nurses provide symptom management, comfort and support to the patient and his/her family.

Oncology nurses are also **educators**. They teach clients and their families, plan educational programs to update staff about new developments in cancer care and work with those new to oncology nursing to assist them to gain the knowledge and skills necessary to provide comprehensive care to those with cancer. For example, here in Hawaii we have two nurses, Diane Nakagaki of Kaiser Permanente Medical Center and Carol McCann of Tripler Army Medical Center, who participated in the chemotherapy/biotherapy administration training program provided by national ONS in a train-the-trainer format. Between the two, they have trained almost 400 registered nurses in the state of Hawaii. Academic educators focus on preparing advanced practice nurses in oncology and assuring that graduates of basic nursing programs have sufficient knowledge about cancer to provide effective nursing care.

In **research** nurses are involved in managing clinical trials in the recruitment of subjects, patient education about the trials, data collection and follow up and are also principal investigators in oncology nursing research projects. ONS is very much involved in facilitating research in oncology nursing and in the utilization of research findings. They publish the results of research priority surveys on a regular basis. The 2000 survey identified nine common priorities between the ONS general membership and the ONS researcher group. They are pain, fatigue, depression, quality of life, early detection, prevention/risk reduction, palliative care, hospice/end of life and access to cancer care.<sup>4-5</sup>

The ONS Foundation strives to generate financial resources to achieve the ONS mission of promoting excellence in cancer nursing and quality cancer care. Since its inception in 1981, this foundation has funded over \$13 million in awards, grants and scholarships. Research funding is a significant component of this funding. Oncology nurse researchers have contributed significantly to new knowledge directly applicable to oncology care in the areas of fatigue, hope in adolescents with cancer, quality of life, self care interventions, and the impact of cancer on the family.

Oncology nurses are active in **health policy**. ONS has a lobbyist in Washington, DC and state health policy liaisons in most states to serve as the link between ONS and each state. Through action alerts ONS is able to mobilize nationwide support for legislative issues relevant to oncology. For example, bills on reimbursement of oncology services and the nurse reinvestment act were hot issues in the fall of 2003 and email alerts from ONS provided Hawaii nurses with opportunities to communicate with their legislators. Hawaii has a state health policy liaison and was selected to participate in a ONS/Association of Community Cancer Centers partnership focused on health policy. A representative from the local ONS and the Hawaii Society of Clinical Oncology attended a training session and are working to determine ways in which these two organizations can partner to impact important advocacy issues related to oncology.

## Certification

The Oncology Nursing Certification Corporation (ONCC) administers a program to certify nurses at the basic and advanced level and in pediatric nursing. Certification is the process by which a non-governmental agency (ONCC) validates, based upon predetermined standards, an individual RN's qualifications and knowledge of practice in a defined clinical area of nursing. Its purpose is to assure the public that the nurse has completed all eligibility criteria to earn a specific credential and to promote the development of specialty areas of nursing by establishing minimum competency standards and recognizing those who have met the standard.<sup>6</sup>

The OCN credential is evidence of basic oncology nursing knowledge of the professional nurse. More than 20,000 nurses have earned this credential. The AOCN exam tests the knowledge of advanced practice nurses in oncology and 1350 oncology nurses nationwide have completed this certification. CPON focuses on the knowledge essential in pediatric oncology nursing and there are 850 CPONs in the United States. Currently in Hawaii, 72 RNs have the OCN certification, one is an AOCN and seven have the CPON credential.<sup>7</sup>

## Oncology Nursing Society (ONS)

The Hawaii Chapter of ONS was founded in 1989 and currently has a membership of about 100 nurses. Our major activities, consistent with the mission of the national organization to promote excellence in patient care, teaching, research administration and education, includes an annual oncology nursing conference held each August which averages 125 participants and dinner lectures often sponsored by pharmaceutical companies. Each year, the Mana'olana (Nurse of Hope) award is presented by the local chapter to a nurse who exemplifies the highest ideals of oncology nursing. Educational awards are available to attend national oncology-related conferences. The local chapter has a collaborative relationship with the Hawaii Society of Clinical Oncology (HSCO). HSCO has provided an educational grant used to promote the specialty of oncology nursing to nursing students. Presentations funded by this award were held at each of the nursing schools on Oahu. In addition, ONS members are invited to become members of HSCO and attend educational programs sponsored by the organization. HSCO recently recognized an oncology nurse, Dorothy Coleman of the Cancer Research Center of Hawaii, with an award for meritorious service.

Hawaii is also well represented at the national level. ONS members have been elected to national offices (Karen Taoka of The Queens Medical Center); appointed to national committees (Joanne Itano of the University of Hawaii @ Manoa), and selected as a fellow for the Leadership Development Institute (Connie Gazmen of the University of Hawaii @ Manoa). Patricia Nishimoto of Tripler Army Medical Center was selected to provide the Schering Oncology/Biotech Clinical Scholarship Lectureship which recognizes and supports excellence in clinical nursing practice. Taoka and Itano are also editors of the *Core Curriculum for Oncology Nursing*, 3<sup>rd</sup> edition.

## Summary

Oncology nursing has matured into a well-established specialty in nursing. The scope of practice for the oncology nurse is broad and spans the continuum of cancer care. Oncology nurses have important roles in all aspects of cancer care. The ONS is the largest organization of oncology professionals in the United States with a membership of about 30,000 and has contributed to the development of oncology nursing through its many educational programs, support of research, opportunities for networking, establishment of certification examinations, and development of an active foundation.

## References

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